

## Electronic Patent Application Fee Transmittal

|   |  |                 |               |                             |
|---|--|-----------------|---------------|-----------------------------|
| <b>Application Number:</b>                              | 10501090   |                 |               |                             |
| <b>Filing Date:</b>                                     | 12-Nov-2004  |                 |               |                             |
| <b>Title of Invention:</b>                              | Surgical instrument for grinding the cotyloid cavity |                 |               |                             |
| <b>First Named Inventor/Applicant Name:</b>             | Arnold Keller  |                 |               |                             |
| <b>Filer:</b>   | Barry E. Bretschneider/Christy Torres                |                 |               |                             |
| <b>Attorney Docket Number:</b>                          | 246472006900   |                 |               |                             |
| Filed as Large Entity                                   |  |                 |               |                             |
| <b>U.S. National Stage under 35 USC 371 Filing Fees</b> |  |                 |               |                             |
| <b>Description</b>                                      | <b>Fee Code</b>                                      | <b>Quantity</b> | <b>Amount</b> | <b>Sub-Total in USD(\$)</b> |
| <b>Basic Filing:</b>                                    |  |                 |               |                             |
| <b>Pages:</b>   |  |                 |               |                             |
| <b>Claims:</b>  |  |                 |               |                             |
| <b>Miscellaneous-Filing:</b>                            |  |                 |               |                             |
| <b>Petition:</b>  |  |                 |               |                             |
| <b>Patent-Appeals-and-Interference:</b>                 |  |                 |               |                             |
| <b>Post-Allowance-and-Post-Issuance:</b>                |  |                 |               |                             |
| <b>Extension-of-Time:</b>                               |  |                 |               |                             |

| Description                             | Fee Code | Quantity | Amount | Sub-Total in USD(\$) |
|---|----------|----------|--------|----------------------|
| <b>Miscellaneous:</b>                   |          |          |        |                      |
| Submission- Information Disclosure Stmt | 1806     | 1        | 180    | 180                  |
| <b>Total in USD (\$)</b>                |          |          |        | <b>180</b>           |